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8
9 **BEFORE THE**
BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS
10 **STATE OF CALIFORNIA**

11 Case No. **2011-161**

12 In the Matter of the Accusation Against:

13 **RENEE ALANE STOEPLER**
14 **1619 S. Buena Vista Avenue**
Corona, CA 92882

A C C U S A T I O N

15 **Registered Nurse License No. 510535**

16 Respondent.

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19 Complainant alleges:

20 **PARTIES**

21 1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her
22 official capacity as the Interim Executive Officer of the Board of Registered Nursing, Department
23 of Consumer Affairs.

24 2. On or about April 10, 1995, the Board of Registered Nursing issued Registered Nurse
25 License Number 510535 to Renee Alane Stoeppler (Respondent). The Registered Nurse License
26 was in full force and effect at all times relevant to the charges brought herein, and expired on
27 March 31, 2009, and has not been renewed.
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2 **JURISDICTION**

3 3. This Accusation is brought before the Board of Registered Nursing (Board),
4 Department of Consumer Affairs, under the authority of the following laws. All section
5 references are to the Business and Professions Code unless otherwise indicated.

6 4. Section 2750 of the Business and Professions Code ("Code") provides, in pertinent
7 part, that the Board may discipline any licensee, including a licensee holding a temporary or an
8 inactive license, for any reason provided in Article 3 (commencing with section 2750) of the
9 Nursing Practice Act.

10 5. Section 2764 of the Code provides, in pertinent part, that the expiration of a license
11 shall not deprive the Board of jurisdiction to proceed with a disciplinary proceeding against the
12 licensee or to render a decision imposing discipline on the license.

13 6. Section 2811(b) of the Code states:

14 Each such license not renewed in accordance with this section shall expire
15 but may within a period of eight years thereafter be reinstated upon payment of the
16 biennial renewal fee and penalty fee required by this chapter and upon submission
17 of such proof of the applicant's qualifications as may be required by the board,
18 except that during such eight-year period no examination shall be required as a
19 condition for the reinstatement of any such expired license which has lapsed solely
20 by reason of nonpayment of the renewal fee. After the expiration of such eight-
21 year period the board may require as a condition of reinstatement that the applicant
22 pass such examination as it deems necessary to determine his present fitness to
23 resume the practice of professional nursing.

24 **STATUTORY PROVISIONS**

25 7. Section 2761 of the Code states:

26 The board may take disciplinary action against a certified or licensed nurse or deny an
27 application for a certificate or license for any of the following:

28 (a) Unprofessional conduct

8. Section 2762 of the Code states:

In addition to other acts constituting unprofessional conduct within the
meaning of this chapter [the Nursing Practice Act], it is unprofessional conduct for
a person licensed under this chapter to do any of the following:

1 (a) Obtain or possess in violation of law, or prescribe, or except as directed
2 by a licensed physician and surgeon, dentist, or podiatrist administer to himself or
3 herself, or furnish or administer to another, any controlled substance as defined in
4 Division 10 (commencing with Section 11000) of the Health and Safety Code or
5 any dangerous drug or dangerous device as defined in Section 4022.

6 (e) Falsify, or make grossly incorrect, grossly inconsistent, or
7 unintelligible entries in any hospital, patient, or other record pertaining to the
8 substances described in subdivision (a) of this section."

9 9. Code section 4060 states:

10 No person shall possess any controlled substance, except that furnished to a
11 person upon the prescription of a physician, dentist, podiatrist, optometrist,
12 veterinarian, or naturopathic doctor pursuant to Section 3640.7, or furnished
13 pursuant to a drug order issued by a certified nurse-midwife pursuant to Section
14 2746.51, a nurse practitioner pursuant to Section 2836.1, a physician assistant
15 pursuant to Section 3502.1, a naturopathic doctor pursuant to Section 3640.5, or a
16 pharmacist pursuant to either subparagraph (D) of paragraph (4) of, or clause (iv)
17 of subparagraph (A) of paragraph (5) of, subdivision (a) of Section 4052. This
18 section shall not apply to the possession of any controlled substance by a
19 manufacturer, wholesaler, pharmacy, pharmacist, physician, podiatrist, dentist,
20 optometrist, veterinarian, naturopathic doctor, certified nurse-midwife, nurse
21 practitioner, or physician assistant, when in stock in containers correctly labeled
22 with the name and address of the supplier or producer. Nothing in this section
23 authorizes a certified nurse-midwife, a nurse practitioner, a physician assistant, or
24 a naturopathic doctor, to order his or her own stock of dangerous drugs and
25 devices.

26 10. Health and Safety Code section 11170 states that no person shall prescribe,
27 administer, or furnish a controlled substance for himself.

28 11. Health and Safety Code section 11173, subdivision (a) states:

No person shall obtain or attempt to obtain controlled substances, or
procure or attempt to procure the administration of or prescription for controlled
substances (1) by fraud, deceit, misrepresentation, or subterfuge; or (2) by the
concealment of a material fact.

COST RECOVERY

12. Section 125.3 of the Code provides, in pertinent part, that the Board may request the
administrative law judge to direct a licensee found to have committed a violation or violations of
the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
enforcement of the case.

1 DRUGS

2 13. Dilaudid, a brand name for hydromorphone, is a Schedule II controlled substance as
3 designated by Health and Safety Code Section 11055(b)(1)(K) and is a dangerous drug pursuant
4 to Business and Professions Code section 4022. Dilaudid is a narcotic analgesic prescribed for
5 the relief of moderate to severe pain.

6 14. Morphine is a Schedule II controlled substance as designated by Health and Safety
7 Code section 11055(b)(1)(M), and is a dangerous drug pursuant to Business and Professions Code
8 section 4022.

9 FACTUAL ALLEGATIONS

10 15. Respondent was employed as a registered nurse in the Nurse Clinic¹ at Kaiser
11 Permanente in Anaheim, California. On or about March 8, 2007, the Kaiser Clinic Manager
12 received a call from another registered nurse, who was Respondent's co-worker, reporting that
13 Respondent was "stealing narcotics." An internal investigation ensued, which included a narcotic
14 audit, interviews of 3 nurses, and review of hospital patient records. The investigation revealed
15 that Respondent obtained narcotics from her patients as follows:

16 16. Patient 1: There were no physician's orders for narcotics for this patient. The
17 appointment records reflect that this patient scheduled an appointment for a Shingles vaccine
18 administration only. On or about March 8, 2007 at 11:15 hours, Respondent documented on the
19 narcotic log² that she removed 4 mg of Dilaudid for this patient. There is no documentation that
20 these narcotics were administered to the patient or that the narcotics were wasted. The Kaiser
21
22

23 ¹ The Nurse Clinic is primarily used when patients need travel immunizations, B12
24 injections, Procrit injections, dressing/wound check, EKGs, primary care, and post-op wound
care. Narcotics are rarely administered in the Nurse Clinic.

25 ² The narcotics in the Nurse Clinic were kept under a key system. The keys to the
26 narcotics were locked at night at the end of the shift, and in the morning were given to the charge
27 nurse. The charge nurse kept the keys under her control during the shift. When a nurse needed
28 narcotics for a patient, they would retrieve the keys from the charge nurse, remove the narcotics
from stock by documenting on the "Controlled Drug Distribution Record" the type and dosage of
narcotics, the date and time it was checked out, the patient's name and the nurse's signature. If
the narcotics needed to be wasted, two nurses' signatures were required.

1 Immunization Tracking Log shows that the Shingles Vaccine was administered to the patient.
2 The 4 mg of Dilaudid are unaccounted for.

3 17. Patient 2: There were no physician's orders for narcotics for this patient. The
4 appointment records reflect that this patient scheduled an appointment for diabetic instructions.
5 On or about March 7, 2007 at 9:30 hours, Respondent documented on the narcotic log that she
6 removed 4 mg of Dilaudid for this patient. There is no documentation that these narcotics were
7 administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid are
8 unaccounted for.

9 18. Patient 3: There were no physician's orders for narcotics for this patient. The
10 appointment records reflect that this patient scheduled an appointment for a routine B12 injection
11 only. On or about March 24, 2007, at 14:30 hours, Respondent documented on the narcotic log
12 that she removed 10 mg of morphine for this patient. There is no documentation that the 10 mg
13 of morphine was administered to the patient or that the narcotics were wasted. Therefore, 10 mg
14 of morphine are unaccounted for.

15 19. Patient 4: There were no physician's orders for narcotics for this patient. The
16 appointment records reflect that this patient scheduled an appointment for Procrit injections only.
17 On or about March 2, 2007 at 9:35 hours, Respondent documented on the narcotic log that she
18 removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg of Dilaudid
19 was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid
20 are unaccounted for.

21 20. Patient 5: There were no physician's orders for narcotics for this patient. The
22 appointment records reflect that this patient did not have a scheduled appointment on February
23 24, 2007; however, the patient did have an appointment scheduled on February 26, 2007 for
24 injections of Testosterone and Neupogen. Respondent documented on the narcotic log that she
25 removed 4 mg of Dilaudid for this patient on February 24, 2007 at 10:05 hours. There is no
26 documentation that the 4 mg of Dilaudid was administered to the patient or that the narcotics
27 were wasted. Therefore, 4 mg of Dilaudid are unaccounted for.
28

1 21. Patient 6: There were no physician's orders for narcotics for this patient. The
2 appointment records reflect that this patient scheduled an appointment for a Procrit injection only.
3 On or about February 23, 2007 at 9:30 hours, Respondent documented on the narcotic log that she
4 removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg of Dilaudid
5 was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid
6 are unaccounted for.

7 22. Patient 7: There were no physician's orders for narcotics for this patient. The
8 appointment records reflect that this patient scheduled an appointment for IV care only. On or
9 about February 19, 2007 at 16:00 hours, Respondent documented on the narcotic log that she
10 removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
11 morphine was administered to the patient or that the narcotics were wasted. Therefore, 10 mg of
12 morphine are unaccounted for.

13 23. Patient 8: There were no physician's orders for narcotics for this patient. The
14 appointment records reflect that this patient scheduled an appointment for a dressing change. On
15 or about February 19, 2007 at 10:00 hours, Respondent documented on the narcotic log that she
16 removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg of Dilaudid
17 was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid
18 are unaccounted for.

19 24. Patient 9: There were no physician's orders for narcotics for this patient. The
20 appointment records reflect that this patient scheduled an appointment for a Procrit injection only.
21 On or about February 16, 2007 at 9:30 hours, Respondent documented on the narcotic log that she
22 removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg of Dilaudid
23 was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid
24 are unaccounted for.

25 25. Patient 10: There were no physician's orders for narcotics for this patient. The
26 appointment records reflect that this patient scheduled an appointment for treatment of a
27 migraine. On or about February 9, 2007 at 3:30 hours, Respondent documented on the narcotic
28 log that she removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg

1 of Dilaudid was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of
2 Dilaudid are unaccounted for.

3 26. Patient 11: There were no physician's orders for narcotics for this patient. The
4 appointment records reflect that this patient scheduled an appointment for IV care only. On or
5 about February 8, 2007 at 3:05 hours, Respondent documented on the narcotic log that she
6 removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg of Dilaudid
7 was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid
8 are unaccounted for.

9 27. Patient 12: There were no physician's orders for narcotics for this patient. The
10 appointment records reflect that this patient scheduled an appointment for IV care only. On or
11 about February 7, 2007 at 16:12 hours, Respondent documented on the narcotic log that she
12 removed 4 mg of Dilaudid for the patient. There is no documentation that the 4 mg of Dilaudid
13 was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid
14 are unaccounted for.

15 28. Patient 13: There were no physician's orders for narcotics for this patient. The
16 appointment records reflect that this patient scheduled an appointment for Procrit injection. On or
17 about February 7, 2007 at 1:00 hours, Respondent documented on the narcotic log that she
18 removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
19 morphine was administered to the patient or that the narcotics were wasted. Therefore, 10 mg of
20 morphine are unaccounted for.

21 29. Patient 14: There were no physician's orders for narcotics for this patient. The
22 appointment records reflect that this patient scheduled an appointment for an injection. On or
23 about February 6, 2007 at 3:18 hours, Respondent documented on the narcotic log that she
24 removed 2 mg of Dilaudid for this patient. There is no documentation that the 2 mg of Dilaudid
25 was administered to the patient or that the narcotics were wasted. Therefore, 2 mg of Dilaudid
26 are unaccounted for.

27 30. Patient 15: There were no physician's orders for narcotics for this patient. The
28 appointment records reflect that this patient scheduled an appointment for an unknown reason.

1 On or about February 5, 2007 at 2:00 hours, Respondent documented on the narcotic log that she
2 removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg of Dilaudid
3 was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid
4 are unaccounted for.

5 31. Patient 16: There were no physician's orders for narcotics for this patient. The
6 appointment records reflect that this patient scheduled a walk-in appointment for the Nurses
7 Clinic. On or about January 30, 2007 at 16:25 hours, Respondent documented on the narcotic log
8 that she removed 2 mg of Dilaudid for this patient. There is no documentation that the 2 mg of
9 Dilaudid was administered to the patient or that the narcotics were wasted. Therefore, 2 mg of
10 Dilaudid are unaccounted for.

11 32. Patient 17: There were no physician's orders for narcotics for this patient. The
12 appointment records reflect that this patient scheduled an appointment for PICC line dressing. On
13 or about January 30, 2007 at 12:00 hours, Respondent documented on the narcotic log that she
14 removed 2 mg of Dilaudid for this patient. There is no documentation that the 2 mg of Dilaudid
15 was administered to the patient or that the narcotics were wasted. Therefore, 2 mg of Dilaudid
16 are unaccounted for.

17 33. Patient 18: There were no physician's orders for narcotics for this patient. The
18 appointment records reflect that this patient scheduled an appointment for a dressing change. On
19 or about January 26, 2007 at 11:00 hours, Respondent documented on the narcotic log that she
20 removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
21 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
22 morphine are unaccounted for.

23 34. Patient 19: There were no physician's orders for narcotics for this patient. The
24 appointment records reflect that this patient scheduled an appointment for a Hepatitis A injection.
25 On or about January 25, 2007 at 15:55 hours, Respondent documented on the narcotic log that she
26 removed 2 mg of Dilaudid for this patient. There is no documentation that the 2 mg of Dilaudid
27 was administered to this patient or that the narcotics were wasted. Therefore, 2 mg of Dilaudid
28 are unaccounted for.

1 35. Patient 20: There were no physician's orders for narcotics for this patient. The
2 appointment records reflect that this patient scheduled an appointment for an ear wash. On or
3 about January 25, 2007 at 14:00 hours, Respondent documented on the narcotic log that she
4 removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
5 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
6 morphine are unaccounted for.

7 36. Patient 21: There were no physician's orders for narcotics for this patient. The
8 appointment records reflect that this patient scheduled an appointment for travel injections. On or
9 about January 24, 2007 at 11:50 hours, Respondent documented on the narcotic log that she
10 removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
11 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
12 morphine are unaccounted for.

13 37. Patient 22: There were no physician's orders for narcotics for this patient. The
14 appointment records reflect that this patient scheduled an appointment for a Depo-Provera birth
15 control injection. On or about January 23, 2007 at 11:10 hours, Respondent documented on the
16 narcotic log that she removed 2 mg of Dilaudid for this patient. There is no documentation that
17 the 2 mg of Dilaudid was administered to this patient or that the narcotics were wasted.
18 Therefore, 2 mg of Dilaudid are unaccounted for.

19 38. Patient 23: There were no physician's orders for narcotics for this patient. The
20 appointment records reflect that this patient scheduled an appointment for a blood pressure check
21 only. On or about January 23, 2007 at 10:10 hours, Respondent documented on the narcotic log
22 that she removed 10 mg of morphine for this patient. There is no documentation that the 10 mg
23 of morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg
24 of morphine are unaccounted for.

25 39. Patient 24: There were no physician's orders for narcotics for this patient. The
26 appointment records reflect that this patient scheduled an appointment for a blood pressure check.
27 On or about January 5, 2007 at 15:00 hours, Respondent documented on the narcotic log that she
28 removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg of Dilaudid

1 was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid
2 are unaccounted for.

3 40. Patient 25: There were no physician's orders for narcotics for this patient. The
4 appointment records reflect that this patient scheduled an appointment for an injection. On or
5 about January 4, 2007 at 2:00 p.m., Respondent documented on the narcotic log that she removed
6 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg of Dilaudid was
7 administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid are
8 unaccounted for.

9 41. Patient 26: There were no physician's orders for narcotics for this patient. The
10 appointment records reflect that this patient scheduled an appointment for a blood pressure check
11 only. On or about January 3, 2007 at 2:00 hours, Respondent documented on the narcotic log that
12 she removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
13 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
14 morphine are unaccounted for.

15 42. Patient 27: There were no physician's orders for narcotics for this patient. The
16 appointment records reflect that this patient scheduled an appointment for a PICC line dressing.
17 On or about January 3, 2007 at 11:00 hours, Respondent documented on the narcotic log that she
18 removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg of Dilaudid
19 was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of Dilaudid
20 are unaccounted for.

21 43. Patient 28: There were no physician's orders for narcotics for this patient. The
22 appointment records reflect that this patient scheduled an appointment for an injection. On or
23 about January 2, 2006 at 10:00 hours, Respondent documented on the narcotic log that she
24 removed 2 mg of Dilaudid for this patient. There is no documentation that the 2 mg of Dilaudid
25 was administered to this patient or that the narcotics were wasted. Therefore, 2 mg of Dilaudid
26 are unaccounted for.

27 44. Patient 29: There were no physician's orders for narcotics for this patient. The
28 appointment records reflect that this patient scheduled an appointment for an unknown reason.

1 On or about December 29, 2006 at 16:55 hours, Respondent documented on the narcotic log that
2 she removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg of
3 Dilaudid was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of
4 Dilaudid are unaccounted for.

5 45. Patient 30: There were no physician's orders for narcotics for this patient. The
6 appointment records reflect that this patient scheduled an appointment for an injection. On or
7 about December 29, 2006 at 3:45 hours, Respondent documented on the narcotic log that she
8 removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
9 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
10 morphine are unaccounted for.

11 46. Patient 31: There were no physician's orders for narcotics for this patient. The
12 appointment records reflect that this patient scheduled an appointment for an unknown reason.
13 On or about December 29, 2006 at 11:00 hours, Respondent documented on the narcotic log that
14 she removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
15 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
16 morphine are unaccounted for.

17 47. Patient 32: There were no physician's orders for narcotics for this patient. The
18 appointment records reflect that this patient scheduled an appointment to receive travel shots
19 only. On or about December 28, 2006 at 11:45 hours, Respondent documented on the narcotic
20 log that she removed 4 mg of Dilaudid for this patient. There is no documentation that the 4 mg
21 of Dilaudid was administered to the patient or that the narcotics were wasted. Therefore, 4 mg of
22 Dilaudid are unaccounted for.

23 48. Patient 33: There were no physician's orders for narcotics for this patient. The
24 appointment records reflect that this patient scheduled an appointment to receive travel shots
25 only. On or about December 28, 2006 at 10:20 hours, Respondent documented on the narcotic
26 log that she removed 10 mg of morphine for this patient. There is no documentation that the 10
27 mg of morphine was administered to this patient or that the narcotics were wasted. Therefore, 10
28 mg of morphine are unaccounted for.

1 49. Patient 34: There were no physician's orders for narcotics for this patient. The
2 appointment records reflect that this patient scheduled an appointment for a PICC line dressing.
3 On or about December 27, 2006 at 11:00 a.m., Respondent documented on the narcotic log that
4 she removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
5 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
6 morphine are unaccounted for.

7 50. Patient 35: There were no physician's orders for narcotics for this patient. The
8 appointment records reflect that this patient scheduled an appointment for an injection. On or
9 about December 26, 2006, Respondent documented on the narcotic log that she removed 4 mg of
10 Dilaudid for this patient. There is documentation of wastage of 1 mg of Dilaudid, which is signed
11 by another nurse. However, there is no documentation that the remaining 3 mg of Dilaudid was
12 administered to the patient or that the remaining narcotics were wasted. Therefore, 3 mg of
13 Dilaudid are unaccounted for.

14 51. Patient 36: There were no physician's orders for narcotics for this patient. The
15 appointment records reflect that this patient scheduled an appointment for a Hepatitis B injection.
16 On or about December 26, 2006 at 3:40 p.m., Respondent documented on the narcotic log that
17 she removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
18 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
19 morphine are unaccounted for.

20 52. Patient 37: There were no physician's orders for narcotics for this patient. The
21 appointment records reflect that this patient scheduled an appointment for a PICC line dressing.
22 On or about December 26, 2006 at 11:55 hours, Respondent documented on the narcotic log that
23 she removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
24 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
25 morphine are unaccounted for.

26 53. Patient 38: There were no physician's orders for narcotics for this patient. The
27 appointment records reflect that this patient scheduled an appointment for a Procrit injection. On
28 or about December 22, 2006 at 13:00 hours, Respondent documented on the narcotic log that she

1 removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
2 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
3 morphine are unaccounted for.

4 54. Patient 39: There were no physician's orders for narcotics for this patient. The
5 appointment records reflect that this patient scheduled an appointment for a blood pressure check
6 only. On or about December 21, 2006 at 10:15 hours, Respondent documented on the narcotic
7 log that she removed 10 mg of morphine for this patient. There is no documentation that the 10
8 mg of morphine was administered to this patient or that the narcotics were wasted. Therefore, 10
9 mg of morphine are unaccounted for.

10 55. Patient 40: There were no physician's orders for narcotics for this patient. The
11 appointment records reflect that this patient scheduled an appointment for December 22, 2006.
12 There was no scheduled appointment for December 20, 2006. However, Respondent documented
13 on the narcotic log that she removed 5 mg of morphine for this patient on December 20, 2006 at
14 12:15 hours. There is no documentation that the 5 mg of morphine was administered to this
15 patient or that the narcotics were wasted. Therefore, 5 mg of morphine are unaccounted for.

16 56. Patient 41: There were no physician's orders for narcotics for this patient. The
17 appointment records reflect that this patient scheduled an appointment for an injection. On or
18 about December 15, 2006 at 16:00 hours, Respondent documented on the narcotic log that she
19 removed 5 mg of morphine for this patient. There is no documentation that the 5 mg of morphine
20 was administered to this patient or that the narcotics were wasted. Therefore, 5 mg of morphine
21 are unaccounted for.

22 57. Patient 42: There were no physician's orders for narcotics for this patient. The
23 appointment records reflect that this patient scheduled an appointment for a blood pressure check
24 only. On or about December 15, 2006 at 15:35 hours, Respondent documented on the narcotic
25 log that she removed 10 mg of morphine for this patient. There is no documentation that the 10
26 mg of morphine was administered to this patient or that the narcotics were wasted. Therefore, 10
27 mg of morphine are unaccounted for.
28

1 58. Patient 43: There were no physician's orders for narcotics for this patient. The
2 appointment records reflect that this patient scheduled an appointment for travel immunizations.
3 On or about December 14, 2006 at 16:00 hours, Respondent documented on the narcotic log that
4 she removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
5 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
6 morphine are unaccounted for.

7 59. Patient 44: There were no physician's orders for narcotics for this patient. The
8 appointment records reflect that this patient scheduled an appointment for an injection. On or
9 about December 13, 2006 at 15:30 hours, Respondent documented on the narcotic log that she
10 removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
11 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
12 morphine are unaccounted for.

13 60. Patient 45: There were no physician's orders for narcotics for this patient. The
14 appointment records reflect that this patient scheduled an appointment for a dressing change. On
15 or about December 5, 2006 at 16:00 hours, Respondent documented on the narcotic log that she
16 removed 10 mg of morphine for this patient. There is no documentation that the 10 mg of
17 morphine was administered to this patient or that the narcotics were wasted. Therefore, 10 mg of
18 morphine are unaccounted for.

19 61. After discovering the numerous discrepancies, the Kaiser Permanente Nurse
20 Executive filed a complaint against Respondent with the Board. Respondent's co-workers were
21 interviewed by a DOI investigator about the events in 2007. L.H. stated that she found that
22 Respondent removed narcotics under patient's names that did not match with the patient schedule
23 and in some cases, the patients never came into the clinic. L.H. stated that she picks up the
24 narcotics keys every morning and carries them with her all day, and that she thought it was
25 strange that Respondent always wanted the keys because narcotics are rarely administered in the
26 Nurse Clinic. L.H. also reported seeing Respondent attempt to start an IV line for a patient, but
27 was unable to because she was shaking so much. C.C. stated that approximately 2 weeks before
28 the narcotic discrepancy discovery, she reported Respondent's "erratic behavior" to the

1 administration. C.C. stated that on one occasion, Respondent came into her office, sat in a chair,
2 laughed, then suddenly cried, and urinated in the chair. C.C. stated that she also carried the
3 narcotics key and Respondent would ask for it more often than other nurses, even though
4 narcotics were rarely administered in the Nurse Clinic.

5 **FIRST CAUSE FOR DISCIPLINE**

6 **(Unprofessional Conduct – Obtain Controlled Substances Unlawfully)**

7 62. Respondent is subject to disciplinary action for unprofessional conduct under section
8 2762(a) for obtaining and possessing controlled substances unlawfully in violation of Business
9 and Professions Code section 4060 and Health and Safety Code sections 11170(a) and 11173(a)
10 as is more particularly set forth in paragraphs 15 through 61 above, and incorporated herein as
11 though set forth in full.

12 **SECOND CAUSE FOR DISCIPLINE**

13 **(Unprofessional Conduct - Falsify or Make Grossly Incorrect or Inconsistent Entries)**

14 63. Respondent is subject to disciplinary action for unprofessional conduct under Code
15 section 2762(e) for falsifying or making grossly incorrect, inconsistent and/or unintelligible
16 entries in the hospital records by withdrawing narcotics, charging the withdrawal to patients who
17 did not receive the drugs or for whom Respondent did not document administration or wastage of
18 the drugs as is more particularly set forth in paragraphs 15 through 61 above, and incorporated
19 herein as though set forth in full.

20 **PRAYER**

21 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
22 and that following the hearing, the Board of Registered Nursing issue a decision:

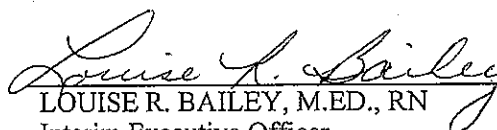
- 23 1. Revoking or suspending Registered Nurse License Number 510535, issued to Renee
24 Alane Stoeppler;
- 25 2. Ordering Renee Alane Stoeppler to pay the Board of Registered Nursing the
26 reasonable costs of the investigation and enforcement of this case, pursuant to Business and
27 Professions Code section 125.3;
- 28

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3. Taking such other and further action as deemed necessary and proper.

DATED: _____

8/31/10



LOUISE R. BAILEY, M.ED., RN
Interim Executive Officer
Board of Registered Nursing
Department of Consumer Affairs
State of California
Complainant

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